

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	3739
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	METHODS AND APPARATUS FOR DELIVERING LOW POWER OPTICAL TREATMENTS
Attorney Docket Number::	105090-0129
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	15
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Gregory
Middle Name::	B.
Family Name::	Altshuler
City of Residence::	Wilmington
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	137 Marion Street
City of mailing address::	Wilmington

State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01887

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Joseph  
Middle Name:: P.  
Family Name:: Caruso  
City of Residence:: Reading  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 30 Zachary Lane  
City of mailing address:: Reading  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01867

#### **Correspondence Information**

Correspondence Customer Number:: 021125

#### **Representative Information**

Representative Customer Number:: 021125

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	09/996,662	11/29/01

#### **Assignee Information**

Assignee name:: PALOMAR MEDICAL TECHNOLOGIES,  
INC.  
Street of mailing address:: 82 Cambridge Street

City of mailing address:: Burlington  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01803

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